DF, 03-26-	1 c				CTION TO BIRTH RECO		· · · · · · · · · · · · · · · · · · ·		
DF. U3-20-	12 200.	TH CAROLIN	A DEPARTM	ENT OF H	EALTH AND ENVIRON	IMENTAL	. CONTROL	Page	2 of 2
Enter Correct information Concerning Person Whose Birth Record is Being Amended	REGISTRANT'S FULL NAME AT BIRTH EVA JANE RIVERS						STATE FILE OR BIRTH NUMBER		
	Month BIRTH MAR	Day 16	Year 1915	BIRTH PLACE	City or Town CHESTERFIELD		unty TERFIELD	State SC	
ITEMS	ITEM OMITTED OR IN ERROR			BIRTH CERTIFICATE SHOWS			SHOULD BE		
TO BE	Given name omitted			Omitted			EVA JANE RIVERS		
OR	Day of Birth			MAR 18 1915			MAR 16 1915		
CORRECTED					•			-	
AFFIDAVIT	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE THE					RECT:	RELATIONSHIP		
NOTARY [AFFIX SEAL]	SUBSCRIBED AND	_	FORE ME ON		SIGNATURE OF NOTARY	~ OO	NOTARY COMM	IISSION EXPIRES	1996
AFFIDAVIT	I HEREBY DECLAR SIGNATURE OF PA [OR OTHER]	RENT	THAT'THE ABO	VE STATEN	SENTS ARE TRUE AND COR	RECT:	RELA DONSHIP		1970
NOTARY [AFFIX SEAL]	SUBSCRIBED AND SWORN TO BEFORE ME ON November 23 1987				SIGNATURE OF NOTARY		NOTARY COMMISSION EXPIRES		
				DO NOT	WRITE BELOW THIS	LINE		· · · · · · · · · · · · · · · · · · ·	19
ABSTRACT	NAME AND KIND OF DOCUMENT (INCLUDING BY WHOM ISSUED AND DATE OF ISSUE) DATE ORIGINAL DOCUMENT								
of	Child's BC, Rockingham, NC 07-14-38 - Vol.26, Page 2						OF	WAS	MADE
Supporting	2 Application to St. Capital Life Insurance Co, Raleigh						NC NC	07-14-3 10-01-5	
Evidence	Policy #8042499							10-01-3	70
(for health	INFORMATION CONCERNING REGISTRANT AS STATED IN DOCUMENT OF CORRESPONDING NUMBER ABOVE								
dept. use)	1 EVA JANE RIVERS - age 23 2 DOB March 16, 1915 Eva Rivers (Terry)								
DHEC No. 613	3 AUDITIONAL INFORMATION								
Rev. 2/75									•
1744	I certify that I have documents referred they show no chang and appear to be a	l to above, that les or erasures	ASSISTANT	STAPLE REC	Wead L	ENCE REVI		well &	DATE FILED